In re	CARMAN NICOLE PHILLIPS	
	Debtor(s)	According to the information required to be entered on this statement
Case Number:		(check one box as directed in Part I, III, or VI of this statement):
	(If known)	☐ The presumption arises.
		■ The presumption does not arise.
		\square The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS				
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.				
	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).				
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.				
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.				
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.				
1C	□ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard				
	a. □ I was called to active duty after September 11, 2001, for a period of at least 90 days and □ I remain on active duty /or/ □ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;				
	OR				
	 b. □ I am performing homeland defense activity for a period of at least 90 days /or/ □ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed. 				

	Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION									
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.									
	a.	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.								
2	 b. ☐ Married, not filing jointly, with declaration of separate households. By checking this box, "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse a purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete for Lines 3-11. 						nd I are living apart other than for the			
		Married, not filing jointly, without the decla "Debtor's Income") and Column B ("Spou					above. Complete both Column A			
		Married, filing jointly. Complete both Colu					Spo	use's Income")	for	Lines 3-11.
		gures must reflect average monthly income re						Column A		Column B
	calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the							Debtor's		Spouse's
		onth total by six, and enter the result on the a			, ,			Income		Income
3	Gross	s wages, salary, tips, bonuses, overtime, cor	nmi	ssions.			\$	1,820.00	\$	
		ne from the operation of a business, profess								
		the difference in the appropriate column(s) of ess, profession or farm, enter aggregate numb								
		nter a number less than zero. Do not include								
4		b as a deduction in Part V.				<u> </u>				
				Debtor		Spouse				
	a.	Gross receipts	\$	0.00						
	b. c.	Ordinary and necessary business expenses Business income		btract Line b from		ne a	\$	0.00	\$	
							Ψ	0.00	Ψ	
	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any									
	part of the operating expenses entered on Line b as a deduction in Part V.									
5	Debtor Spouse									
	a. b.	Gross receipts Ordinary and necessary operating expenses	\$	0.00 0.00						
	c.	Rent and other real property income		btract Line b from	_		\$	0.00	\$	
6		est, dividends, and royalties.					\$	0.00		
7		on and retirement income.					\$	0.00		
	Any a	amounts paid by another person or entity, o	n a	regular basis, for	· th	e household	i i			
_	expen	ses of the debtor or the debtor's dependent	ts, iı	cluding child sup	po	rt paid for that				
8		ose. Do not include alimony or separate main								
	spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.					\$	0.00	\$		
		aployment compensation. Enter the amount i		•	_		Ė			
	Howe	ever, if you contend that unemployment comp	ensa	ation received by ye	ou	or your spouse was a				
9	benefit under the Social Security Act, do not list the amount of such compensation in Column A									
		but instead state the amount in the space belo	w:	T						
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$					\$	0.00	\$		
	Incon	ne from all other sources. Specify source and	d an	ount. If necessary	v. li	st additional sources				
	on a s	eparate page. Do not include alimony or sep	ara	te maintenance pa	ayr	nents paid by your				
		te if Column B is completed, but include all tenance. Do not include any benefits received								
		red as a victim of a war crime, crime against h								
10		stic terrorism.		,,						
				Debtor		Spouse				
		CHILD SUPPORT	\$	560.00						
	b.	1	\$		\$		_		_	
	Total and enter on Line 10 Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if				\$	560.00	\$			
11		nn B is completed, add Lines 3 through 10 in					\$	2,380.00	\$	

12	Total Current Monthly Income for § 707(b)(7). If Column B has been con Column A to Line 11, Column B, and enter the total. If Column B has not be the amount from Line 11, Column A.		2,380.00		
	Part III. APPLICATION OF § 707(b	o)(7) EXCLUSION			
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amou enter the result.	\$	28,560.00		
14	Applicable median family income. Enter the median family income for the (This information is available by family size at www.usdoj.gov/ust/ or from				
	a. Enter debtor's state of residence: TN b. Enter debtor	's household size: 3	\$	53,963.00	
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.				
15	■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.				
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.				

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCUL	ATION OF CURI	RENT	MONTHLY INCOM	ME FOR § 707(b)(2	2)
16	Enter the amount from Line 12.					\$
17	Marital adjustment. If you check Column B that was NOT paid on a dependents. Specify in the lines be spouse's tax liability or the spouse amount of income devoted to each not check box at Line 2.c, enter ze a.	a regular basis for the hole slow the basis for exclude s support of persons of purpose. If necessary,	ousehol ding the her thai	d expenses of the debtor or e Column B income (such a n the debtor or the debtor's o itional adjustments on a sep	the debtor's s payment of the dependents) and the	
	b.			\$ \$		
	c. d.			\$		
	Total and enter on Line 17					\$
18	Current monthly income for § 70	77(b)(2). Subtract Line	17 fro	m Line 16 and enter the resu	ılt.	\$
	Part V. C	ALCULATION (OF DI	EDUCTIONS FROM	INCOME	
	Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)					
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tay return, plus the number of any additional dependents whom					
	a1. Allowance per person		a2.	Allowance per person	or older	
	b1. Number of persons		b2.	Number of persons		
	c1. Subtotal	C	c2.	Subtotal		\$
Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.				\$		

20B	Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your coun available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy counter that would currently be allowed as exemptions on your feed any additional dependents whom you support); enter on Line be the total debts secured by your home, as stated in Line 42; subtract Line be from not enter an amount less than zero. [a. IRS Housing and Utilities Standards; mortgage/rental expense]			
	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$		
	c. Net mortgage/rental expense	Subtract Line b from Line a.	\$	
21	Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entit Standards, enter any additional amount to which you contend you are contention in the space below:	\$		
	Local Standards: transportation; vehicle operation/public transportation			
	You are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation.	f whether you pay the expenses of operating a		
22A	Check the number of vehicles for which you pay the operating expension included as a contribution to your household expenses in Line 8.	es or for which the operating expenses are		
	□ 0 □ 1 □ 2 or more. If you checked 0, enter on Line 22A the "Public Transportation" amounts are considered in the constant of the constant	unt from IRS Local Standards:		
	Transportation. If you checked 1 or 2 or more, enter on Line 22A the '	'Operating Costs" amount from IRS Local		
	Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/	\$		
22B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that you public transportation expenses, enter on Line 22B the "Public Tra Standards: Transportation. (This amount is available at www.usdoj.go court.)	\$		
	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)			
	□ 1 □ 2 or more.			
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of			
20	Monthly Payments for any debts secured by Vehicle 1, as stated in Lir the result in Line 23. Do not enter an amount less than zero.			
	a. IRS Transportation Standards, Ownership Costs \$			
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42	\$		
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$	
	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23.			
	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of			
24	Monthly Payments for any debts secured by Vehicle 2, as stated in Lir the result in Line 24. Do not enter an amount less than zero.	ne 42; subtract Line b from Line a and enter		
	a. IRS Transportation Standards, Ownership Costs	\$		
	Average Monthly Payment for any debts secured by Vehicle b. 2 as stated in Line 42	\$		
	b. 2, as stated in Line 42 c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	
25		ecessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal,		
23	state and local taxes, other than real estate and sales taxes, such as inconsecurity taxes, and Medicare taxes. Do not include real estate or sale	te and sales taxes, such as income taxes, self employment taxes, social ot include real estate or sales taxes.		

26	Other Necessary Expenses: involuntary deductions for endeductions that are required for your employment, such as ro Do not include discretionary amounts, such as voluntary	etirement contributions, union dues, and uniform costs.	\$	
27	Other Necessary Expenses: life insurance. Enter total ave life insurance for yourself. Do not include premiums for in any other form of insurance.	\$		
28	Other Necessary Expenses: court-ordered payments. Entipay pursuant to the order of a court or administrative agency include payments on past due obligations included in Lin	\$		
29	Other Necessary Expenses: education for employment or the total average monthly amount that you actually expend f education that is required for a physically or mentally challe providing similar services is available.	\$		
30	Other Necessary Expenses: childcare. Enter the total aver childcare - such as baby-sitting, day care, nursery and prescl		\$	
31	Other Necessary Expenses: health care. Enter the total aver health care that is required for the health and welfare of your insurance or paid by a health savings account, and that is in include payments for health insurance or health savings as	rself or your dependents, that is not reimbursed by excess of the amount entered in Line 19B. Do not	\$	
32	Other Necessary Expenses: telecommunication services. actually pay for telecommunication services other than your pagers, call waiting, caller id, special long distance, or internwelfare or that of your dependents. Do not include any amount of the properties of th	basic home telephone and cell phone service - such as net service - to the extent necessary for your health and	\$	
33	Total Expenses Allowed under IRS Standards. Enter the	total of Lines 19 through 32.	\$	
	Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your			
34	dependents. a. Health Insurance \$			
	a. Health Insurance \$ b. Disability Insurance \$			
	c. Health Savings Account \$		\$	
	Total and enter on Line 34.		-	
	If you do not actually expend this total amount, state your below: \$	r actual total average monthly expenditures in the space		
35	Continued contributions to the care of household or fami expenses that you will continue to pay for the reasonable and ill, or disabled member of your household or member of you expenses.	d necessary care and support of an elderly, chronically	\$	
36	Protection against family violence. Enter the total average actually incurred to maintain the safety of your family under other applicable federal law. The nature of these expenses is	\$		
37	Home energy costs. Enter the total average monthly amour Standards for Housing and Utilities, that you actually expentrustee with documentation of your actual expenses, and claimed is reasonable and necessary.	\$		
38	Education expenses for dependent children less than 18. actually incur, not to exceed \$147.92* per child, for attendar school by your dependent children less than 18 years of age. documentation of your actual expenses, and you must expenses and not already accounted for in the IRS Standard Counter Cou	nce at a private or public elementary or secondary You must provide your case trustee with plain why the amount claimed is reasonable and	\$	

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				\$
40	Continued charitable co	ontributions. Enter the amount that you will cont charitable organization as defined in 26 U.S.C. §		ne form of cash or	\$
41	Total Additional Expens	se Deductions under § 707(b). Enter the total of	f Lines 34 through 40		\$
		Subpart C: Deductions for D	Debt Payment		
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.				
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a.		\$	□yes □no	
			Total: Add Lines	<u> </u>	\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor				\$
44	Payments on prepetition priority tax, child support not include current obli	\$			
	Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.				
45	 a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) c. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b 				\$
46	Total Deductions for De	ebt Payment. Enter the total of Lines 42 through	45.		\$
		Subpart D: Total Deductions	from Income		
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.			\$	
	P	art VI. DETERMINATION OF § 707	(b)(2) PRESUMP	TION	
48	Enter the amount from	Line 18 (Current monthly income for § 707(b)((2))		\$
49	Enter the amount from	Line 47 (Total of all deductions allowed under	§ 707(b)(2))		\$
50	Monthly disposable inco	ome under § 707(b)(2). Subtract Line 49 from Li	ine 48 and enter the res	ult.	\$
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.				

	Initial presumption determination. Check the applicable box and proceed as directed.						
52		☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.					
	statement, and complete the verification in Part VIII. You may	Theck the box for "The presumption arises" at the top of page 1 of this also complete Part VII. Do not complete the remainder of Part VI.					
	☐ The amount on Line 51 is at least \$7,025*, but not more t	than \$11,725*. Complete the remainder of Part VI (Lines 53 through 55).					
53	Enter the amount of your total non-priority unsecured debt	\$					
54	Threshold debt payment amount. Multiply the amount in Line	e 53 by the number 0.25 and enter the result.					
	Secondary presumption determination. Check the applicable	box and proceed as directed.					
55	☐ The amount on Line 51 is less than the amount on Line 50 of this statement, and complete the verification in Part VIII.	4. Check the box for "The presumption does not arise" at the top of page 1					
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.						
	Part VII. ADDITIONA	AL EXPENSE CLAIMS					
56	you and your family and that you contend should be an addition						
	each item. Total the expenses.	parate page. All figures should reflect your average monthly expense for					
	Expense Description	Monthly Amount					
	a. b.	\$					
	c.	\$					
	d.	\$					
	Total: Add Lines	a, b, c, and d \$					
	Part VIII. VE	CRIFICATION					
		in this statement is true and correct. (If this is a joint case, both debtors					
57	must sign.) Date: December 13, 2012	Signature: /s/ CARMAN NICOLE PHILLIPS					
31		CARMAN NICOLE PHILLIPS (Debtor)					

^{*} Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.